

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NextGen Climate Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00547349	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee MVS Media Group		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016	
Mailing Address 1800 S Ocean Dr		Amount 1450.00	
City Hallandale Beach	State FL	Zip Code 33009-7734	Transaction ID : VNTPK9TSCX3
Purpose of Expenditure Mobile Billboard Advertising - Estimate		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Trump, Donald, J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		5303671.66	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Wildfire Contact LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2016	
Mailing Address 400 E Court Ave Ste 126		Amount 10498.84	
City Des Moines	State IA	Zip Code 50309-2000	Transaction ID : VNTPK9TSCY1
Purpose of Expenditure Printing - Estimate		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Trump, Donald, J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		5303671.66	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	11948.84
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	11948.84

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Copeland, Rita, , ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 19 / 2016

Signature